60th Medical Group (AMC), Travis AFB, CA

INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE (IACUC)

FINAL REPORT SUMMARY

(Please type all information. Use additional pages if necessary.)

PROTOCOL #: FDG20140037A			DATE: 25 June 2015		
PROTO scrofa).		t study of chest tube versus p	oigtail catheter drainage of	acute hemothorax in Swine (Sus	
PRINC	IPAL INVESTIGATO	OR (PI) / TRAINING COORD	INATOR (TC): Maj Scott	Zakaluzny/Capt R. Russo	
DEPARTMENT: General Surgery			PHONE #: (707)423-5224		
INITIAL APPROVAL DATE: 28 August 2014			LAST TRIENNIAL REVISION DATE: N/A		
FUNDI	NG SOURCE: USAI	Surgeon General's Office.			
1.	RECORD OF ANIM	MAL USAGE:			
An	imal Species:	Total # Approved	# Used this FY	Total # Used to Date	
Sus sc	rofa	15	12	12	
******	• 1.411.414.414.414.414.414		6		
2.	PROTOCOL TYPE / CHARACTERISTICS: (Check all applicable terms in EACH column) Training: Live Animal Medical Readiness Prolonged Restraint Training: non-Live Animal Health Promotion Multiple Survival Surgery Research: Survival (chronic) Prevention Behavioral Study X_ Research: non-Survival (acute) Utilization Mgt. Adjuvant Use				
3.	Other (
4.	PROTOCOL STATUS:				
		Protocol Closure:			
	Inactive, protocol never initiated				
	Inactive, protocol initiated but has not/will not be completed				
	X_ Completed, all approved procedures/animal uses have been completed				
5.	Previous Amendment	nents: s made to the protocol IF n	one occurred, state NON	E. <u>Do not use N/A.</u>	
	Amendment D	dy Chronologically ate of Summary o pproval	of the Change	***	
6.	FUNDING STATUS	: Funding allocated:	\$ Funds re	maining: \$	
7.		ONNEL CHANGES:			

or annual review?YesX_No
If yes, complete the following sections (Additions/Deletions). For additions, indicate whether or not the IACUC has approved this addition.
ADDITIONS: (Include Name, Protocol function - PI/CI/AI/TC/Instructor, IACUC approval - Yes/No)
<u>DELETIONS</u> : (Include Name, Protocol function - PI/CI/AI/TC/Instructor, Effective date of deletion)
PROBLEMS / ADVERSE EVENTS: Identify any problems or adverse events that have affected study

None

9. REDUCTION, REFINEMENT, OR REPLACEMENT OF ANIMAL USE:

indicate whether or not these events were reported to the IACUC.

REPLACEMENT (ALTERNATIVES): Since the last IACUC approval, have afternatives to animal use become available that could be substituted in this protocol without adversely affecting study or training objectives? No

progress. Itemize adverse events that have led to unanticipated animal illness, distress, injury, or death; and

No.

<u>REFINEMENT</u>: Since the last IACUC approval, have any study refinements been implemented to reduce the degree of pain or distress experienced by study animals, or have animals of lower phylogenetic status or sentience been identified as potential study/training models in this protocol? No

No.

<u>REDUCTION</u>: Since the last IACUC approval, have any methods been identified to reduce the number of live animals used in this protocol? No

No.

10. <u>PUBLICATIONS / PRESENTATIONS</u>: (List any scientific publications and/or presentations that have resulted from this protocol. Include pending/scheduled publications or presentations).

Oral presentation: A pilot study of chest tube versus pigtail catheter drainage of acute hemothorax in Swine (Sus scrofa). Western Trauma Association 45th Annual Meeting, 1 March 2015, Telluride, CO

Oral presentation: A pilot study of chest tube versus pigtail catheter drainage of acute hemothorax in Swine (Sus scrofa). UC Davis Resident Research Day. 27 April 2015, Sacramento, CA

Poster Presentation: A pilot study of chest tube versus pigtail catheter drainage of acute hemothorax in Swine (Sus scrofa). DGMC research day. 15 June, 2015 Travis, AFB, CA

Upcoming Poster Presentation: A pilot study of chest tube versus pigtail catheter drainage of acute hemothorax in Swine (Sus scrofa). MHSRS (date TBD). Orlando, FL

Publication: Russo, RM. Et. Al. A pilot study of chest tube versus pigtail catheter drainage of acute hemothorax in swine. Journal of Trauma and Acute Care Surgery. In press.

11. Were the protocol objectives met, and how will the outcome or training benefit the DoD/USAF?

The objectives were partially met. The first protocol hypotheses was that there is no significant difference in the rate of blood drainage from the chest between pigtail catheters and standard tubes in an in vivo pig model. This objective was met. The second hypothesis was that this drainage rate will not be significantly altered with the patient on positive pressure ventilation as compared to spontaneously breathing. The volume of hemothorax necessary for this study produced high mortality and low information yield in the spontaneously ventilating group during model development so the decision was made to limit the experiment to mechanically ventilated pigs. This pilot study will serve as the basis for future translational studies on the use of less invasive catheters for the treatment of traumatic hemothorax to speed patient recovery, decrease complication rates associated with current treatment, reduce patient pain, and decrease the weight/size of combat medical packs.

12. <u>PROTOCOL OUTCOME SUMMARY</u>: (Please provide, in "ABSTRACT" format, a summary of the protocol objectives, materials and methods, results - include tables/figures, and conclusions/applications.)

see attachment

(PITTC Signature)

(Date)

Attachments:

Attachment 1: Defense Technical Information Center (DTIC) Abstract Submission (Mandatory)

Attachment 1

Defense Technical Information Center (DTIC) Abstract Submission

This abstract requires a brief (no more than 200 words) factual summary of the most significant information in the following format: Objectives, Methods, Results, and Conclusion.

Background: Management of traumatic hemothorax (HTx) with pigtail catheters has not been widely adopted due to concerns about blood evacuation rates. We compared pigtail catheters with standard chest tubes for the drainage of acute HTx in a swine model.

Methods: Seven hundred-fifty milliliters of blood was withdrawn from each femoral artery and instilled into each pleural space in mechanically ventilated swine. A 32F chest tube was placed in one randomly assigned hemithorax; a 14F pigtail catheter was placed in the other. Output from each drain was measured every minute for 5 minutes, then every 5 minutes for 40 minutes.

Results: Blood drainage was more rapid from the chest tube during the first three minutes compared to the pigtail catheter (348 ±109 mL/min vs. 176±53 mL/min) but this difference was not statistically significant (p=0.19). Thereafter, the rates of drainage between the two tubes were not substantially different. The chest tube drained a higher total percentage of the blood from the chest (87.3% vs 70.3%), but this difference did not reach statistical significance (p=0.21).

Conclusion: We found no statistically significant difference in the volume of blood drained by a 14F pigtail catheter compared to a 32F chest tube.

Grant Number:	
From:	
**If you utilized an external grant, please provide Grant # and where the grant came from	m. Thank you.